

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	Unknown
Filing Date	Even Date Herewith
First Named Inventor	Hezeltine, Alton
Gr up Art Unit	Unknown
Examiner Name	Unknown

Sheet 1 of 1

Attorney Docket No: 884.413US3

**US PATENT DOCUMENTS**

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	Filing Date If Appropriate
NC	US-4,040,164	08/09/1977	Briles, Franklin S.	29	432	03/12/1976
	US-4,213,301	07/22/1980	Maier, Elmar, et al.	60	407	02/27/1979
	US-4,463,888	08/07/1984	Geist, Bernard W., et al.	227	109	04/22/1981
	US-5,437,339	08/01/1995	Tanaka, Hiroshi	173	210	03/17/1993
NC	US-6,095,256	08/01/2000	Lindsay, Steven J.	173	115	01/19/2000

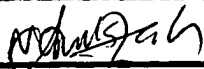
**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	T <sup>2</sup>
--------------------	---------------------	------------------	---	-------	----------	----------------

**OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
--------------------	----------------------	---	----------------

EXAMINER



DATE CONSIDERED 4/4/09

Substitute Disclosure Statement Form (PTO-1449)

\* EXAMINER: Initials if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached